

ADACHI P265US

COMBINED DECLARATION AND POWER OF ATTORNEY

10/518822

(Original, Design, National Stage of PCT, Supplemental)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (check one applicable item below)

- ☐ original
- ☐ design
- ☐ supplemental
- ☒ National Stage of PCT
- ☐ divisional (see added page)
- ☐ continuation (see added page)
- ☐ continuation-in-part (see added page)

INVENTORSHIP IDENTIFICATION

My/our residence, post office address and citizenship is/are as stated below next to my/our name. I/We believe that the named inventor or inventors listed below is/are the original and first inventor or inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

CATHETER

SPECIFICATION IDENTIFICATION

The specification of which: (complete (a), (b) or (c))

- (a) ☐ is attached hereto.
- (b) ☐ was filed on \_\_\_\_\_ with an effective filing date of June 20, 2003  
as  
☐ Serial No. \_\_\_\_\_ or  
☐ Express Mail No. \_\_\_\_\_ as Serial No. (not yet known) and  
was amended on \_\_\_\_\_ (if applicable).
- (c) ☒ was described and claimed in PCT International Application No. \_\_\_\_\_  
PCT/JP2003/07899 filed on June 20, 2003 and  
as amended under PCT Article 19 on \_\_\_\_\_ (if any).
- (d) ☐ amended on \_\_\_\_\_

POWER OF ATTORNEY

As a named inventor, I hereby appoint all of the practitioners associated with the Customer Number 020210 namely, Anthony G. M. Davis, Registration No. 27,868, Gary D. Clapp, Registration No. 29,055, Michael J. Bujold, Registration No. 32,018, Scott A. Daniels, Registration No. 42,462 and Jay S. Franklin, Registration No. 54,105, as attorneys and/or agents to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection therewith.

☐ Attached as part of this Declaration and Power of Attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

Send Correspondence to:

Customer No. 020210  
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Direct Facsimiles to: (603) 624-9229

(603) 624-9229

## ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I/We hereby state that I/we have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I/We acknowledge the duty to disclose to the United States Patent Office all information which is known to be material to patentability of this application as defined in § 1.56 of Title 37 of the Code of Federal Regulations.

## PRIORITY CLAIM

I/We hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me/us on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

### EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NO.	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
Japan	2002-181726	21, 06, 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

### ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

- ☐ I/We hereby claim the benefit, under 35 U.S.C. 119(e), of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

## DECLARATION

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00  
Full name of sole or first joint inventor: Mitsuru HORIBA  
Inventor's signature: [Signature] Date: December 27, 2004  
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2-00  
Full name of second joint inventor: Nobumasa TSUTSUI  
Inventor's signature: [Signature] Date: December 27, 2004  
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461-0023 Japan  
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3-00  
Full name of third joint inventor: Yasuhiro TSUTSUI  
Inventor's signature: [Signature] Date: December 27, 2004  
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Full name of fourth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of fifth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of sixth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of seventh joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of eighth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of ninth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Full name of tenth joint inventor: \_\_\_\_\_  
Inventor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Post Office Address: \_\_\_\_\_  
Residence: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_